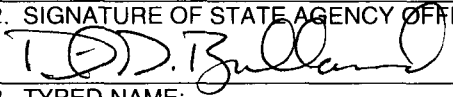
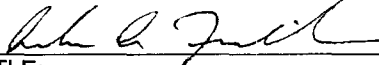


<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES</b>		<b>1. TRANSMITTAL NUMBER:</b>  <div style="text-align: center;"><b>04-27</b></div>	<b>2. STATE:</b>  <div style="text-align: center;"><b>TEXAS</b></div>
		<b>3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</b>	
<b>TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>		<b>4. PROPOSED EFFECTIVE DATE:</b> December 1, 2004	
<b>5. TYPE OF PLAN MATERIAL (Circle One):</b>  <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT ( <i>Separate Transmittal for each amendment</i> )			
<b>6. FEDERAL STATUTE/REGULATION CITATION:</b> Title XIX, Social Security Act, as amended		<b>7. FEDERAL BUDGET IMPACT: SEE ATTACHMENT</b> a. FFY 05      \$ 0 b. FFY 06      \$ 0	
<b>8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:</b>  SEE ATTACHMENT		<b>9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):</b>  SEE ATTACHMENT	
<b>10. SUBJECT OF AMENDMENT:</b> This amendment will remove reference to service coordination for individuals enrolled in Mental Retardation Local Authorities (MRLA). The MRLA waiver program was discontinued and the individuals enrolled in the MRLA program have been enrolled in the Home and Community Based Services (HCS) program. The amendment will not impact the rate of those local authorities providing case management for individuals with mental retardation, a related condition, or pervasive developmental disorder. The reimbursement methodology will remain the same. The effective date of the amendment is December 1, 2004.			
<b>11. GOVERNOR'S REVIEW (Check One):</b> <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      Sent to Governor's Office this date. Comments, if any, will be <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL      forwarded upon receipt.			
<b>12. SIGNATURE OF STATE AGENCY OFFICIAL:</b> 		<b>16. RETURN TO:</b>  <b>David Balland</b> <b>Interim State Medicaid Director</b> <b>Post Office Box 13247</b> <b>Austin, Texas 78711</b>	
<b>13. TYPED NAME:</b> David Balland			
<b>14. TITLE:</b> Interim State Medicaid Director			
<b>15. DATE SUBMITTED:</b> December 17, 2004			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
<b>17. DATE RECEIVED:</b> 22 DECEMBER 2004		<b>18. DATE APPROVED:</b> 22 MARCH 2005	
<b>PLAN APPROVED – ONE COPY ATTACHED</b>			
<b>19. EFFECTIVE DATE OF APPROVED MATERIAL:</b> 1 DECEMBER 2004		<b>20. SIGNATURE OF REGIONAL OFFICIAL:</b> 	
<b>21. TYPED NAME:</b> ANDREW A. FREDRICKSON		<b>22. TITLE:</b> ASSOCIATE REGIONAL ADMINISTRATOR DIV OF MEDICAID & CHILDREN'S HEALTH	
<b>23. REMARKS:</b>			

## CASE MANAGEMENT SERVICES

For

Persons with Mental Retardation or Related condition or Pervasive Developmental Disability

A. Target Population

The target population are Medicaid eligible individuals with mental retardation or a related condition or pervasive developmental disability and require long term care in the community.

Mental retardation is defined as significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior and originating during the developmental period. Sub-average general intellectual functioning refers to measured intelligence on standardized psychometric instruments of two or more standard deviations below the age group mean for the tests used. Developmental period means the period of time from conception to 18 years. Arrest or deterioration of intellectual ability that occurs after this period is functional retardation and does not meet the definition of mental retardation. Related condition is defined as a severe, chronic disability that meets the criteria outlined in 42 CFR §453.1009. Pervasive developmental disorder (PDD) is characterized by severe and pervasive impairment in several areas of development: reciprocal social interaction skills, communication skills, or the presence of stereotyped behavior, interests, and activities that meet the criteria outlined in the most current version of the Diagnostic and Statistical Manual of Mental Disorders.

B. Definition of Services

Case management activities are provided to assist Medicaid eligible individuals with mental retardation or a related condition or pervasive developmental disability in gaining access to medical, social, educational, and other appropriate services that will help them achieve a quality of life and community participation acceptable to each individual. The role of persons who provide case management activities is to support and assist the person in achieving personal goals. Case management is provided regardless of age.

Case management activities include:

- **Screening and Assessment:** Obtaining client-identifying information and identifying the nature of the presenting problem and service and support needs of the individual which are documented.
- **Crisis Intervention:** Locating and coordinating emergency services which are documented in writing.
- **Service Planning and Coordination:** Identifying and arranging for the delivery of services and supports that address the individual's needs which are documented in writing. This includes community reintegration planning during the last 180 consecutive days of a Medicaid eligible person's stay in a Medicaid certified acute care facility, Nursing Facility (NF), Institution for Mental Diseases (IMD) for individuals age 65 or older and children under the age of 21, or Intermediate Care Facility for the Mentally Retarded.
- **Monitoring:** Evaluating the effectiveness of the services and the need for additional or different services which are documented in writing.

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**C. Service Limitations**

Case Management activities will not be reimbursable as a Medicaid service if another payor is liable or, if the activities are associated with the proper and efficient administration of the state plan. Case management activities associated with the following are not reimbursable as targeted case management service:

- Medicaid eligibility determinations and re-determinations;
- Medicaid eligibility intake processing;
- Medicaid pre-admission screening;
- Prior authorization for Medicaid services;
- Required Medicaid utilization review;
- Texas Health Steps administration; and
- Medicaid "lock-in" provided for under Section 1915(a) of the Omnibus Reconciliation Act of 1987.

Specifically, reimbursement will not be made for:

- Services that are an integral and inseparable part of another Medicaid services;
- Discharge planning from an institution for mental diseases (except for individuals age 65 or older and children under the age of 21);
- Outreach activities that are designed to locate individuals who are potentially Medicaid eligible; or
- Any medical evaluation, examination, or treatment billable as a distinct Medicaid covered benefit; however, referral arrangement and staff consultation for such services are reimbursable as case management activities.

**D. Qualifications of Providers**

Section 4118(I) of P.L. 100-203, Omnibus Budget Reconciliation Act of 1987, is invoked limiting the provider of case management activities to the State Mental Retardation Authority, which is the Texas Department of Mental Health and Mental Retardation (TDMHMR), or local authorities designated in accordance with §534.054 of the Texas Health and Safety Code.

TDMHMR has implemented rules, standards, and procedures to ensure that case management activities are:

- Available on a statewide basis with procedures to ensure continuity of services without duplication;
- Provided by persons who meet the requirements of education and work experience commensurate with their job responsibilities as specified by TDMHMR; and
- In compliance with federal, state, or local laws, including directives, settlements, and resolutions applicable to the target population.

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